

MAINE DEPARTMENT OF ENVIRONMENTAL PROTECTION

MULTI-SECTOR STORMWATER NOTICE OF TERMINATION FORM

Submission of this Notice of Termination (NOT) constitutes notice that the entity identified in Section C is no longer in business, changed ownership, has filed a Notice of Intent, or has filed a No Exposure Certification to comply with Maine's Multi-Sector General Permit. All of the required information on this form must be completed.

Please read the instructions on the back of this Notice of Termination prior to completing this form.

A. PERMIT INFORMATION

MEPDES Multi-Sector General Permit Number or No Exposure Certification Number:

No longer the operator of the facility, check here:	<input type="checkbox"/>	Date Ceased:
Business closed or operations terminated, check here:	<input type="checkbox"/>	Date Terminated:
Title, Right or Interest has changed, check here:	<input type="checkbox"/>	Date Changed:
Facility has filed a Notice of Intent to comply with MSGP:	<input type="checkbox"/>	Date Changed:
Facility has filed a No Exposure Certification to comply with MSGP:	<input type="checkbox"/>	Date Changed:
Facility has filed an Individual/Alternative General Permit:	<input type="checkbox"/>	Date Changed:

B. COMPANY INFORMATION – LEGAL NAME & BILLING ADDRESS

Permit Owner Legal Name:		ME State Charter Number:	
Mailing Address:			
Town/City/ Unorganized Twp:		State:	Zip Code:
Daytime Phone: (with area code)		Email: (if available)	

C. FACILITY/SITE INFORMATION

Facility/Site Name:		Latitude: (if known)		Longitude: (if known)	
Physical Location: (Street/Road)		Town/City:			
County:		State:	ME	Zip Code:	

D. CERTIFICATION

By my signature as a responsible official for the entity or individual identified in Section B of this Notice of Termination, I certify under penalty of law that that I am no longer the operator of the facility, or no longer have Title, Right or Interest, as indicated in Section A. I also understand that the submittal of this Notice of Termination does not by itself release an operator from liability for any prior violations of the permit or the Clean Water Act.

Printed Full/Legal Name:		Date:	
Title:			
Signature:			

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Instructions for Completing the Stormwater Notice of Termination Form

Type or handprint required information in the appropriate areas. If hand-printing, use uppercase letters. Once all sections have been completed, photocopy the form for your records, and then send the original to:

**Maine Department of Environmental Protection, Industrial Stormwater Management Program
17 State House Station, Augusta, ME 04333-0017**

Section A: Permit Information

Enter the existing **MEPDES** Multi-Sector Stormwater No Exposure Certification number assigned to the facility or site identified in Section C at the time it registered by filing a No Exposure Certification. If you do not know the permit number call or write to the D.E.P. Stormwater Coordinator for that information. Indicate the reason for submitting this **Notice of Termination** by checking the appropriate box.

1. If there has been a change that resulted in the currently listed owner/operator no longer being in charge of the facility or site identified in Section C, check that corresponding box and indicate the date on which the change occurred.
2. If business operations have ceased or the business is closed, check that corresponding box and indicate the date when the business closed.
3. If Title, Right or Interest in the facility has changed, check the corresponding box.
4. If there has been a change in operations which resulted in the exposure of industrial activity or raw material to stormwater and the facility has filed a Notice of Intent to comply with Maine's Multi-Sector General Permit, check the corresponding box.
5. If there has been a change in facility operations such that industrial activity or raw materials are no longer exposed to stormwater, and the facility has filed a No Exposure Certification to comply with Maine's Multi-Sector General Permit, check the corresponding box.
6. If the facility has filed an Individual/Alternative Permit for stormwater discharge associated with an industrial activity check the corresponding box.

Section B: Facility Owner or Operator Information

1. The full legal name of the person, partnership, co-partnership, firm, company, corporation, association, trust, estate, governmental entity or other legal entity that owns/operates the facility or site. This may be the given name of an individual (as listed on their social security card) or a registered legal entity (please see number #2 in this section). The name of the operator in this section may or may not be the same as the name of the facility that will be provided in Section C.
2. Legal entities registered to conduct business in Maine, whether for profit or not for profit, have a Charter Number issued to a particular name by the State of Maine, Department of the Secretary of State, Bureau of Corporations, Elections and Commissions (note: federal and municipal owned entities are not issued a Charter Number). In the absence of such a registration number, the NOT must be filed in the name of an individual whether or not they are conducting business under an unregistered assumed name.
3. The mailing address of the identified facility operator will be the street address or P.O. Box, city/town, state and zip code at which US Mail is regularly delivered. All correspondence regarding the permit will be sent to this address, not the facility address in Section C.
4. The telephone number listed for the facility operator must be a number at which calls are regularly received during business hours (8:00 AM to 5:00 PM).

Section C: Facility/Site Information

1. If the name of the facility or site is different than the information provided in Section B, it must be listed so the unique location is identified in the way commonly referred to within the legal entity or as it is known locally.
2. The street address must be provided consistent with the e911 address assigned to the location. If no e911 address exists, a geographic description (e.g., intersection of Routes 9 and 55), city/town, county, and zip code must be used. Rural Route (R.R.) or P.O. Box addresses are not acceptable in this section.
3. The latitude and longitude of the approximate center of the facility or site in degrees/minutes/seconds may be obtained by using a Global Positioning System (G.P.S.) unit, or by locating the facility through any of a number of free mapping sites on the internet.

Section D: Certification

An individual certifying as the responsible official must be:

1. For a corporation: a corporate officer with authority to bind the company; or
2. For a partnership or sole proprietorship: a general partner or the proprietor; or
3. For a municipal, State, Federal, or other public facility: a principal executive or ranking elected official